NO. OF COPIES RECE	IVEO		
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SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR		<u> </u>	
		1	1

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWARIE

Form C -104 Supersedes Old C-104 and C-110

511.5	KEQUEST I	AND	Effective 1-1-65	
FILE	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
J.S.G.S.	AUTHORIZATION TO TRAI	NSFORT OIL AND NATOKA	ic on	
OIL				
RANSPORTER GAS				
PERATOR				
PROPATION OFFICE				
perator Industries,	· lan			
Koch Exploration Comp	ery (Div. of Koch Indust	ries, Inc.)		
ddress				
P. O. Box 2256, Wichi				
eason(s) for filing (Check proper box)		Other (Please explain)		
lew Well	Change in Transporter of:			
Recompletion	Oil Dry Ga. Casinghead Gas Conden			
Change in Ownership	Casinghead Gas Conden		F-	
change of ownership give name	11.10 1 0 -11.	En Death	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
d address of previous owner	Apch Indiana	Enplorate		
ECCREPOTON OF WELL AND	FEACE	U		
ESCRIPTION OF WELL AND	Well No. Pool Name, Including F	ormation Kind of	Lease No.	
Gardner	3-A Blanco Mesa Ve	erde State, Fo	ederal or Fee NM-01364	
ocation				
Unit Letter P ; 7	790' Feet From The South Lin	e and 840' Feet F	From The East (SW SW)	
Jim Berrar		_	San Juan Causta	
Line of Section 31 To	wnship 32N Range 8	3W , NMPM,	San Juan County	
		_		
ESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	Address (Give address to which	approved copy of this form is to be sent)	
Vame of Authorized Transporter of Oll	or condensate			
Name of Authorized Transporter of Ca	singhead Gas or Dry Gas	Address (Give address to which	approved copy of this form is to be sent)	
Northwest Pipeline Co	-	P. O. Box 1526, Sal		
	Unit Sec. Twp. Age.	Is gas actually connected?	When	
if well produces oil or liquids, give location of tanks.		No	September 1, 1980	
	th that from any other lease or pool,	give commingling order number		
f this production is commingled wi	that from any other rease of poer,			
	Oil Well Gas Well	New Well Workover Deep	en Plug Back Same Res'v. Diff. Res'	
Designate Type of Completi	on - (A) XX	XX	D. D. W. D.	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D. 5880	
January 27, 1980	April 16, 1980	6100	Tubing Depth	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay 5414-5847'	5869	
KB 6524', GL 6510'	Mesa Verde	3414-3047	Depth Casing Shoe	
Perforations	1 56261			
5706'-5847' and 5414		ID CEMENTING RECORD		
	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
HOLE SIZE	10-3/4"	191'	250	
13-1/2" 8-3/4"	7"	3661'	700	
	4-1/2"	6091'	150	
6-1/4"	2-3/8"	5869 '		
TEST DATA AND REQUEST I	FOR ALLOWARIE (Test must be	after recovery of total volume of lo	ad oil and must be equal to or exceed top all	
OIL WELL	able for this	depth or be for full 24 hours)	53	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump,		
			Chore Size	
Length of Test	Tubing Pressure	Casing Pressure	= 1000 T	
		Water Bhia	Muses tage	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	OIL CON. COM.	
			DIST. 3	
GAS WELL	The state of The s	Bbls. Condensate/MMCF	Gravity of Condensate	
Actual Prod. Test-MCF/D	Length of Test	Bala: Condendato, mino.		
2430	24	Casing Pressure (Shut-in)	Choke Size	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	861	3/8"	
Back pr.	735			
CERTIFICATE OF COMPLIA	NCE	ו ברס"ז	ERMANDU COMMISSION	
		APPROVED	. 19	
I hereby certify that the rules an	d regulations of the Oil Conservation	n Original Signed by	FRANK T. CHAVEZ	

BY.

TITLE .

Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

, Vernon J. Low<u>e</u>

(Date)

Assistant Director of Operations

(Title)

August 22, 1980

This form is to be filed in compliance with RULE 1104.

SUPERVISOR DISTRICT # 3

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition Separate Forms C-104 must be filed for each pool in multiply completed wells.